CITY OF TILLAMOOK



City of Tillamook 210 Laurel Avenue Tillamook, OR 97141

Fax: 503-842-3445 Telephone: 503-842-2472

Application for Volunteer Position

Position:	
Name:	Phone:(h)
Address:	(w)
	(c)
Registered Vot	er: (yes)(no) Ward/Precinct:
	le a letter of interest, stating your reasons for volunteering, s and any experience you may have to offer.
Are you availat	ole for evening meetings?(yes)(no)
If there is a nig	ht you would be unavailable, please specify:
	elected for this position, would you be interested in accepting another volunteer ne City of Tillamook?(yes)(no)
	ious question, please specify which other volunteer position would interest you lanning Commission, Budget Committee, etc)
Signature:	Date:
NOTE: Applica	nts will be required to attend a City Council meeting prior to appointment.